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UNFPA

UNITED NATIONS POPULATION FUND
PROPOSED PROJECTS AND PROGRAMMES
Recommendation by the Executive Director
Assistance to the Government of Niger
Support for a comprehensive population programme

Proposed UNFPA assistance:	$10.7 million, of which $6.5 million is to be committed from UNFPA's regular resources. If UNFPA's funding situation permits, the balance of up to $4.2 million will be provided by UNFPA. If and to the extent this is not the case, UNFPA will seek to cover the shortfall from other sources, including multi-bilateral sources.
Estimated value of the Government's contribution:	To be determined
Duration:	Five years
Estimated starting date:	January 1992
Executing agencies:	Government of Niger United Nations International Labour Organisation (ILO) World Health Organization (WHO) United Nations Education, Scientific and Cultural Organization (UNESCO) CARE, Niger
Government co-ordinating agency:	Ministry of Planning

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NIGER

Demographic facts

Population Total (000)	
Total	7,109
Males	3,524
Females	3,585
Sex ratio (/100 females)	98.3
Urban	1,385
Rural	5,725
Per cent urban	19.5
Population in year 2000 (000)	9,750
Functional age groups (%)	
Young child: 0-4	19.6
Child: 5-14	27.7
Youth: 15-24	18.8
Elderly: 60+	4.4
65+	2.8
Women: 15-49	21.9
Median age (years)	16.3
Dependency ratios: total	100.5
(/100) Aged 0-14	94.8
Aged 65+	5.7
Agricultural population density (/hectare of arable land)	1.63
Population density (/sq. km.)	6
Average annual change (000)	
Population increase	241
Births	387
Deaths	146
Net migration	0
Annual population total (% growth)	3.13
Urban	6.50
Rural	2.22
Crude birth rate (/1000)	50.2
Crude death rate (/1000)	19.0
Net migration rate (/1000)	0
Total fertility rate (/woman)	7.00
Gross reproduction rate (/woman)	3.45
Net reproduction rate (/woman)	2.40
Infant mortality rate (/1000)	124
Life expectancy at birth (years)	
Males	44.9
Females	48.1
Both sexes	46.5
GNP per capita (U.S. dollars, 1988)	300

Sources: Population density on arable land is derived from two publications issued by the Food and Agriculture Organization of the United Nations: FAO Production Yearbook 1985 and World-wide Estimates and Projections of Agricultural and Non-Agricultural Population Segments 1950-2025, ESS/MIS/86/2; gross national production per capita: World Bank, World Development Report 1990. Figures for population, total population by sex, population by age group, age indicators, urban-rural population, and population density (/sq. km.) refer to the year 1990; figures for average annual change, rate of annual change, and fertility and mortality are the five-year averages for 1990-1995. These data are from the Population Division, Department of International Economic and Social Affairs of the United Nations, World population prospects: 1988.

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I. SUMMARY

1. The United Nations Population Fund (UNFPA) proposes to support a population programme in the amount of $10.7 million, of which $6.5 million would be committed from UNFPA's regular resources, over a five-year period, starting January 1992, to assist the Government of Niger, a priority country, in achieving its population and development objectives. If UNFPA's funding situation permits, the balance of up to $4.2 million may be provided by UNFPA. If and to the extent this is not possible, UNFPA would seek to cover the shortfall from other sources, including multi-bilateral sources. This would be the third cycle of UNFPA assistance to Niger. The second programme, approved in 1987 in the amount of $4 million, came to an end in December 1990 and bridge funding is in place in order to synchronize this programme with the Government's national development plan for 1992-1996 and the with United Nations Development Programme's fifth programming cycle (1992-1996).

2. The proposed programme is based on: (a) the Government's priorities and strategies elaborated in the 1987-1991 development plan, the plan of action (1989-1993) of the Directorate of Family Planning, the draft population policy and the five-year population action programme; (b) the findings of the 1989 multisectoral review mission and the recommendations of the 1990 UNFPA-Government programme review; and (c) extensive discussions with senior officials of sectoral ministries, as well as with representatives of agencies of the United Nations system, non-governmental organizations (NGOs), and multilateral and bilateral donors in the population field.

3. The programme would assist the Government in achieving three broad objectives with corresponding strategies and programmes: (a) to attain a demographic growth rate in harmony with the country's social and economic development rate; (b) to reduce maternal, infant and child morbidity and mortality; and (c) to increase the participation of women and youth in the socio-economic development process.

4. All projects under the proposed programme, as in all UNFPA-assisted programmes, would be undertaken in accordance with the principles and objectives of the World Population Plan of Action; that is, that population policies should be consistent with internationally and nationally recognized human rights of individual freedom, justice, and the survival of national, regional and minority groups (para. 14 (d)); that respect for human life is basic to all human societies (para. 14 (e)); and that all couples and individuals have the basic right to decide freely and responsibly the number and spacing of their children and to have the information, education and means to do so (para. 14(f)).

II. BACKGROUND

5. Niger is one of the world's least developed countries. At the last census (1988), the population was 7.2 million and was growing at an annual rate of 3.4 per cent. Nearly half the population (49.4 per cent) is under 15 years of age. About 80 per cent of the population is concentrated in the southern agricultural belt, i.e., on 1 per cent of the national territory, where the population has doubled in the last 25 years and the population density is as high as 50 inhabitants per square kilometre, contributing to the rapid degradation of the environment. The urban population is increasing rapidly. Estimated at 5 per cent of the total in 1960 and 13 per cent in 1977, it is now 15 per cent and is expected to rise to 25 per cent by the year 2000.

6. The demographic and health situation in Niger is worse than in many of the neighbouring countries with the same level of income. The infant and maternal mortality rates are 134 and 7 per 1,000, respectively, and the fertility rate, which has been constant over the last two decades, is 7 children per woman. The national

contraceptive prevalence rate is estimated at 2.6 per cent, which covers the extremes of 25 per cent in the capital, Niamey, and 1 per cent in the rural areas.

7. With a negative per capita economic growth rate of 1.9 per cent since 1980, the average per capita income has fallen as low as $300. Development is very uneven between the urban and rural areas. Gross primary school enrolment in Niger, currently one of the lowest in Africa, actually fell from 27 per cent in 1980 to 26 per cent in 1989. Only 19 per cent of school-age girls are enrolled in primary schools, and only 3 per cent in secondary schools. Nation-wide, 25 per cent of the pupils enrolled are drop-outs, three quarters of whom are girls. The national literacy rates are very low, 19 per cent for men and 10 per cent for women.

8. It is estimated that only 33 per cent of the population has access to a fixed health facility, and until 1987, the National Family Health Centre was the only public health facility offering family planning. Today, family planning services are provided by a third of the health units. Here again, the disparity between Niamey and the rural areas is striking. The coverage rate for the first prenatal consultation is 93.2 per cent in Niamey and only 18 per cent elsewhere. For professional assistance in childbirth, the rates are 84 per cent in Niamey and 9 per cent in the rural areas.

9. The population of Niger is 95 per cent Muslim. In general, the persistence of large families in Niger reflects lack of access to family planning services as well as attitudes and beliefs favouring high fertility. Women are better informed about family planning than are men, and the number of women having some knowledge of contraception is quite high in Niamey (84.6 per cent) but very small in the rural areas. The situation of women in Niger is determined by low literacy and income levels, early marriages, pro-natalist values, and low status within the household.

10. The Government has taken a number of steps to improve the position of women. These include the creation of the Niger Women's Association (NWA) in 1975 and of the Ministry of Social Affairs and Women's Promotion in 1989, and the drafting of a family code and a policy for the integration of women into the development process. In addition, a programme supporting socio-economic activities for women has been adopted.

11. Up to the early 1980s, the Government of Niger had a pro-natalist policy. Niger's growing economic problems in the 1980s and the organization of workshops and seminars on family health and planning from 1985 to 1990 helped convince the political, traditional, and religious leaders that the country's population problems had to be addressed. Action on population policy included the following: (a) the inclusion in the current national Development Plan (1987-1991) of a section on the socio-economic implications of the country's rapid population growth and the establishment in 1990 of the Interministerial Technical Committee on Population, which was to propose a population policy and plan of action in early 1991; (b) the repeal of the 1920 French law banning contraception; (c) the creation in 1989 of the Family Planning Directorate within the Ministry of Social Affairs and Women's Promotion responsible for the integration of family planning (FP) into all maternal and child health (MCH) activities; and (d) the elaboration of a family health action programme, which was approved in 1989.

III. REVIEW OF UNFPA AND OTHER ASSISTANCE TO DATE

12. UNFPA started its assistance to Niger in 1983 with a four-year programme in the amount of $2.06 million. UNFPA's second programme of assistance, covering 1987-1990 in the amount of $4 million, allocated the majority of the resources for the support of population information, education and communication (IEC) activities, followed by MCH/FP and population data collection and analysis. Other components included population policy

formulation, the integration of population variables into the socio-economic development plan, awareness creation of the situation of women and training for women.

13. Despite considerable achievements, several general constraints hampered the efficient implementation of population activities in Niger. These included: the frequent rotation of government staff; insufficient co-ordination within the Government and between public and private-sector institutions involved in population activities; insufficient co-ordination within the international donor community in the field of population; lack of or limited involvement of beneficiaries and local staff in project design, implementation and monitoring; insufficient numbers of personnel with technical and managerial skills to formulate, manage, monitor and evaluate population projects; and the Government's delay in taking the necessary legal and institutional measures to facilitate population programme implementation.

Maternal and child health and family planning

14. The objectives of the first phase of MCH/FP activities (1983-1986) were to formulate and implement a national family health programme; provide MCH/FP clinical services in the capital, supported by IEC activities; and implement a training and research programme. During the second phase (1987-1990), such activities were extended to three departments. Achievements during the whole period include the construction of the National Family Health Centre, provision of training and clinical services, and introduction of family planning services in Niamey and in the major urban centres of the three departments. As a result of the improved MCH/FP infrastructure in Niamey and the three departmental capitals, contraceptive prevalence increased rapidly from 10 per cent in 1988 to 25 per cent in 1990 in Niamey and from 0 per cent in 1988 to 16 per cent in 1990 in the departmental capitals. Other achievements include an increased capacity in terms of human resources and infrastructure to expand the programme in the future, and a readiness among the urban population to practise family planning as a health measure. A mid-1989 assessment of the situation in cities outside the three departmental capitals found many shortcomings related to lack of management information and logistics systems, insufficiently trained human resources, lack of equipment, and the frequent rotation of staff.

Information, education and communication

15. In general, the approach in the IEC sector has been ineffective since activities have tended to be ad hoc and dispersed rather than comprehensive and interrelated. Mass media have been underutilized, and the messages designed have concentrated on the mother and child health rationale for child-spacing, overlooking the underlying socio-cultural and economic determinants for high fertility. There have been no activities designed to address the problems of young women.

16. Population education in schools. From 1983 to 1990, population education was introduced in 8 primary schools, 10 high schools, and 2 teacher training schools nation-wide. Didactic materials were developed, but the socio-cultural studies planned to be carried out in all regions of the country were deferred to 1991.

17. Family life information and communication. UNFPA assistance to this sector started in 1988 with the objectives of increasing awareness among the members of six rural co-operatives in three departments of the benefits of MCH/FP. Activities include the training of local government staff, teachers and community organizers; sensitization of co-operative movement leaders and elected officials; conduct of socio-cultural research and implementation of micro-projects.

18. UNFPA has also provided support to an AIDS education project funded jointly with UNDP. The UNFPA component includes seminars for the youth organization and in-school youth, and training of traditional birth attendants in AIDS-related matters.

Population data collection and analysis

19. UNFPA support to civil registration and vital statistics activities has centred on sensitizing the population to the need to declare vital events; training of civil servants in data processing; and supervision of registration centres nation-wide and of marabouts (religious and spiritual leaders) and traditional birth attendants in collecting statistics on vital events in villages not covered by government staff. An important instrument for promoting the efficiency of the civil registration system was its decentralization in 1985 and the involvement of all social actors such as traditional birth attendants, marabouts, and traditional chiefs in its implementation. As a result of project activities, registration of births and deaths has increased, from 30 per cent and 23 per cent, respectively, in 1985 to 56 per cent and 32 per cent, respectively, in 1990. A recent evaluation of the project found among other things that, while the project had established procedures for vital statistics collection, it had not succeeded in convincing people of the importance of registration, especially of deaths. The evaluation also found that the civil registration staff was not sufficiently motivated to process the data collected.

20. UNFPA also provided assistance in the implementation of the general population census, the enumeration of which took place in May 1988. It is expected that the complete census report will be ready by June 1991. No major constraints were experienced during project implementation. The census was co-funded by Canada, through a multi-bilateral arrangement, as well as by UNDP, the World Bank, the United States Agency for International Development (USAID), and the French bilateral development agency.

Population policy formulation

21. UNFPA financed the establishment of the first population unit in 1984 with the long-term objectives of stimulating government and public interest in population issues; assisting the Government to formulate population policy on the basis of various population and development research projects to be carried out within the main project framework; integrating population variables into socio-economic development planning; and reinforcing the institutional structure and human resources for population and development activities. In its first phase, the Population Unit made considerable progress in stimulating and generating consensus at the highest level of Government regarding the need to address the country's rapid rate of population growth. During the second phase, and since the Unit is located in the Statistical Office, all the Office's resources were drawn upon to speed up the publication of census results. Additionally, a major change of project staff after the first phase and the delayed fielding of the Chief Technical Adviser prevented the project from reaching the objective of formulating a population policy and integrating population variables into development planning.

Women, population and development

22. During the implementation of the 1987-1990 programme, efforts have been made to integrate women's concerns into all projects supported by UNFPA. In general, the UNFPA programme has demonstrated the precarious situation of women, especially regarding health, and has convinced officials that it is important to improve women's status in order to improve the general well-being of the population and to slow demographic growth. Specific sector support was given, in collaboration with other donors, to strengthen the capacity of the Niger Women's Association (NWA) and the Directorate of Women's Promotion to identify the needs of women's groups and assist them in implementing population education activities. Major constraints on project

implementation that should be addressed during the implementation of the proposed programme are: (a) the relative weakness of the NWA, which has only six permanent staff; (b) the lack of an overall framework for women in development activities; and (c) the lack of in-depth understanding among political leaders, planners and the general population about the effect of the low status of the women of Niger on fertility behaviour. These problems are compounded by the scarcity of statistics and research material on the situation of women.

Other external assistance

23. Total population assistance to Niger for 1987-1990 is estimated at $23 million. The main donors have been UNFPA, USAID, United Nations Children's Fund (UNICEF) and the World Bank. Contraceptive supplies amounted to a total value of $260,000, of which USAID provided 72.5 per cent and UNFPA 24.8 per cent.

24. USAID has programmed population assistance amounting to $7.4 million (1986-1993), containing a family health component and a demographic component. The family health component focuses on, among other things, integrating family planning services into health units at the district level as well as family health training into the curriculum of health workers. It also seeks to establish a contraceptive logistics system. The demographic component concerns the analysis of census data and the organization of the upcoming demographic and health survey. UNICEF, continuing its assistance to basic family health, has committed $12.8 million for 1991-1995 for an integrated health project to provide sustainable primary health care services at the village level, supported by a strong IEC programme, and to establish, in collaboration with UNFPA, a village health management system. In its 1987-1992 health programme, the World Bank earmarked $1.9 million for family planning activities and $2.5 million for the 1988 census, the former being intended to supplement USAID and UNFPA assistance.

IV. PROPOSED UNFPA PROGRAMME 1992-1996

25. The 1992-1996 proposed programme is based on the recommendations of the annual programme review conducted jointly by UNFPA and the Government of Niger and the draft national population policy. UNFPA activities would be implemented mainly in Niamey and four departments, in three of which UNFPA is already funding activities and which together cover 76 per cent of the national population. The objectives of the programme are noted in paragraph 3.

26. The programme strategies would be to assist the Government in: (a) expanding Niger's information base through the conduct of an intercensal demographic survey in 1994, a national study on the socio-economic condition of women and its impact on the welfare of families, and research on the interrelationship between population distribution, urbanization and environment; (b) raising the national capacity in the field of demography, population and development, and programme and project conception, implementation, management and evaluation; (c) extending MCH/FP services, within the framework of the Safe Motherhood Initiative, to all fixed health units within UNFPA's geographical area of coverage and establishing an outreach programme to the rural communities; (d) establishing a comprehensive and co-ordinated strategy for the implementation of IEC activities; (e) educating and sensitizing youth in and out of school on population and family welfare issues; (f) reinforcing the institutional framework and human resources of the Niger Women's Association, the Directorate of Women's Promotion and other relevant government institutions to permit them to plan and manage activities to improve the condition of women in the field of population and health; and (g) promoting the co-ordination of population activities within the Government and the international donor community.

Maternal and child health and family planning

27. The objective of activities in this sector would be to reach an average contraceptive prevalence of approximately 15 per cent by 1996 in Niamey and in four departments (including both rural and urban areas) through improving the quality of MCH/FP services; extending family planning services to all existing fixed health units in the areas now covered by UNFPA; and establishing a village outreach programme, including a system for ensuring the financial sustainability of family health services. Contraceptive requirements for the UNFPA-assisted programme include approximately 3.2 million condoms, 200,000 injectables, 20,000 IUDs and 2.2 million cycles of pills. UNFPA would also provide the additional national requirements of 330,000 injectables. The programme would also seek: (a) to establish a co-ordination mechanism in the Ministry of Public Health, which is responsible for overseeing the delivery of family planning services at the departmental level, and in the Ministry of Social Affairs and Women's Promotion, which is responsible for developing the family planning policy and guidelines at the central level; (b) to increase family planning services to young women aged 15-19; and (c) to address problems of infertility.

28. In order to improve the quality of services in health units covered by UNFPA, as well as to enhance the management and supervision of activities, the programme would: (a) upgrade one departmental centre for family health, in order to have it serve as a model regional referral and training centre; (b) expand and improve the incipient system for collecting MCH/FP client statistics and managing MCH/FP services and contraceptive supplies through training of supervisory clinical and administrative staff at all levels; (c) train staff in IEC techniques, including interpersonal communication, and improve IEC materials in support of family planning; and (d) promote the integration of family planning into MCH/FP activities at all health units and ensure that all units are appropriately equipped. The outreach component of the programme, to be implemented in Niamey and the four departments, would consist of training and equipping the village health teams to enable them to provide selected family planning services and counselling at the village level, to ensure safe deliveries and to register births and deaths.

29. A total amount of $4.2 million would be provided for activities in this sector, including approximately $1.2 million for contraceptives. An amount of $1.7 million would be sought from other sources, including multi-bilateral sources. WHO and CARE, Niger, would serve as executing agencies.

Information, education and communication

30. UNFPA would make use of a combination of mass and interpersonal communication strategies to achieve the following objectives: (a) ensure an improved co-ordination of all national IEC activities under the guidance of a national IEC policy and programme; (b) promote awareness among modern and traditional political and mass movement leaders of the importance of population and family health issues for socio-economic development; (c) redress the urban bias of existing IEC materials; and (d) educate youth in and out of school in responsible parenthood. The programme would also seek to introduce population education in all primary and secondary schools and in technical and teachers' colleges nation-wide, covering approximately 100,000 pupils and 2,500 teachers in 1,000 schools. Education and information on AIDS would be included in all activities. A total amount of $3.1 million would be provided to the IEC sector, $1.4 million of which would be sought from other sources, including multi-bilateral sources.

31. Information and communication. UNFPA would assist the Government in establishing a co-ordination mechanism among all government departments, services and mass movements involved in IEC activities under the leadership of the Directorate for Health Information and Education within the Ministry of Health. The

Directorate would set resource allocations, outline a comprehensive national training programme, and elaborate research aimed at defining appropriate message content, taking into account the need to address family planning use in rural communities and among secondary user-groups, men and youth, and producing adequate promotional materials in support of population and health activities. The proposed programme would focus on undertaking operational socio-cultural/ anthropological research that would shed light on the determinants of fertility and contraceptive use, which in turn would suggest the most effective channels of communication to reach selected target groups, particularly in rural communities. Front-line health workers such as traditional birth attendants and community organizers would be used to increase the population's knowledge of modern contraception, family welfare and health issues.

32. In spite of a general government policy of promoting family planning there is still widespread resistance to the concept among the country's political and traditional leadership. UNFPA would make use of the network of the Société de Développement, a decentralized social organization, to sensitize and inform elected leaders at all levels by organizing seminars, a regional conference of Muslim leaders and study tours and by distributing promotional materials. UNFPA would also, together with other donors, ensure that the population dimension is included in a training manual being prepared by the National Development Council to be used during the political and civil training of elected leaders. This effort would be supplemented by the equipping of radio-clubs under the responsibility of the National Development Council. To ensure that population issues are included in radio programmes, the Fund would train one member of each club in relevant topics, as well as provide basic radio equipment. Population education would also be introduced at the professional training centre for media technicians. In view of the seriousness of the desertification problem and in support of government actions, UNFPA would support the production of didactic and informational materials on the relationship between demographic factors and environmental problems, to be used within a variety of UNFPA- and other donor-funded socio-economic development and population activities. A total amount of $950,000 would be reserved for this component.

33. Formal population education. UNFPA would continue to support the introduction of comprehensive population and family life education in the public school system at the primary, secondary, and teachers' college levels. The programme would seek to expand such integration from 20 schools to 1,000 schools nation-wide, including the medersa, where the classical modern education is combined with the teachings of Islam. A total amount of $850,000 would be provided for this component. The project would continue to be executed by UNESCO.

34. Non-formal population education. The Government has established a number of education and youth promotion centres where unemployed youth of both sexes are given practical skills to permit their reintegration into the labour market. UNFPA is proposing to integrate family life and responsible parenthood education into the activities of three such centres catering for approximately 50 young people each. UNFPA support would also be used to train 65 staff of the Ministry of Youth, Sports and Culture in charge of supervising organizers of various youth movements. A total amount of $300,000 would be provided for this component. UNFPA would continue to direct its population IEC efforts to 20 new co-operatives in the three departments covered by the Fund. UNFPA assistance to this component, which would be executed by the ILO, would amount to $1 million.

Data collection and analysis

35. The objective in this sector would be to improve the availability and quality of demographic data relevant for policy formulation and implementation. Total UNFPA support to this sector would amount to $900,000, of

which $200,000 would be sought from other sources, including multi-bilateral sources. The activities in this area would be executed by the United Nations.

36. UNFPA would contribute to the analysis of the 1988 census and to the demographic and health survey to be funded by USAID and due to start in 1991. A total amount of $200,000 would be reserved for this component. Within the framework of the social dimensions of the structural adjustment household survey programme funded by UNDP and implemented by the World Bank, UNFPA proposes to finance the intercensal demographic survey planned for 1994 as a follow-up to the demographic and health survey and to fill in the gaps in population dynamics not covered by the survey. A total amount of $620,000 would be reserved for this component.

37. Although a civil registration project ended in 1990, there is still a need to process and analyse the vital statistics collected. Support in terms of micro-computers and some training would be given to the Statistical Office for this purpose. UNFPA support for this component would be in the amount of $80,000.

Population policy formulation

38. The objective of UNFPA support to this sector would be to assist the Government in implementing the recently formulated comprehensive population and development policy as an integral part of the new socio-economic development plan, 1992-1996, and to assist the Government in carrying out studies on the interrelationship between population, environment and development. A total of $1.3 million would be reserved for this sector, of which $500,000 would be sought from other sources, including multi-bilateral sources.

39. A study on the interrelationships between population distribution, urbanization and the environment would be carried out as a means of establishing a data base and providing the basis for awareness creation and policy formulation. This study, to be undertaken within the framework of the proposed sub-regional migration survey for West Africa, would be co-ordinated by the Centre d'Etudes et de Recherches sur la Population pour le Developpement (CERPOD) in collaboration with the Institut de Recherches en Sciences Humaines, the Department of Geography and the Directorate of Statistics and Demography. UNFPA would provide $300,000 for this component.

40. Considering the present lack of national counterpart staff specialized in the integration of population and development planning, the UNFPA programme would train staff within the Population Unit as well as other relevant sector ministries in this subject. The aim would be to enhance the Population Unit's capacity to establish a conceptual, action-oriented framework for the integration of population variables at all levels of socio-economic development planning; monitor and assess the implementation of the population plan of action; co-ordinate all population programme activities; and promote the optimal use of available demographic surveys in population and development planning. An amount of $1 million would be provided for this component.

Women, population and development

41. The primary objectives of UNFPA assistance would be to assist the Government in establishing a national policy and institutional framework to improve the status of women, as well as in improving the knowledge of policy makers, planners, religious and traditional leaders and the general population of the relationship between socio-economic development, including the welfare of families, and women's status. UNFPA would collaborate with Canada and the European Community in providing training for departmental staff of the Directorate of Women's Promotion and staff in various sectoral ministries and NGOs in initiating, managing and evaluating women-in-development programmes and projects relevant to the field of population and family health. The Fund would also

support a national study on the socio-economic situation of women and its impact on the welfare of families. The study would serve as the basis for the formulation of a comprehensive national policy for the promotion of women.

42. UNFPA would continue to assist the Niger Women's Association by providing technical assistance to strengthen NWA's activities in population and family health. One component would be, as part of the outreach programme described under the MCH/FP sector, to establish sustainable micro-projects for financing the village health team activities and the referral of high-risk pregnancy cases to better equipped hospitals. Total support to this sector would be $600,000, of which $400,000 would be sought from other sources, including multi-bilateral sources.

Special programmes

43. Youth. In order to assist the Government in defining its future policy to improve the condition of youth, UNFPA would fund, in collaboration with UNDP, studies to analyse the problems of problem in Niger. This study would provide a basis for the formulation of a national plan of action for youth. Assistance would also be provided to organize a seminar to discuss research results and to draft a youth policy proposal. UNFPA would provide $200,000 for these activities.

Programme reserve

44. The proposed country programme would contain a reserve of $400,000 in order to allow the Fund to respond to unforeseen needs.

Programme co-ordination

45. Under the structural adjustment programme, the Government has established sectoral/thematic committees in the MCH/FP, IEC, and women and development sectors, allowing for sectoral co-ordination and monitoring of all donor assistance. It is expected that the Interministerial Technical Population Committee set up in May 1990 within the Ministry of Planning will be reinforced and entrusted with the intersectoral co-ordination and monitoring of programme implementation. This would be complemented by the regular meetings organized by UNDP with the donor community to exchange views and information on programmes and strategies. The major donors providing contraceptives (USAID, UNFPA) would meet under the chairmanship of the Family Planning Directorate twice a year to assess contraceptive needs and monitor progress in service delivery and the contraceptive prevalence rate. UNFPA would ensure that effective collaboration/co-ordination would take place with UNICEF, UNDP and the World Food Programme during project formulation, within the context of the Joint Consultative Group on Policy (JCGP). UNFPA would distribute evaluation results and findings of population-related studies and reviews to donors and executing agencies. The programme is synchronized with UNDP's fifth cycle of assistance to Niger.

Programme monitoring, evaluation and management

46. Population project monitoring and evaluation is weak in most government institutions of Niger. UNFPA would therefore emphasize the increased involvement of nationals in project design and the training of key UNFPA counterpart personnel in project formulation, implementation, monitoring and evaluation. The programme would be monitored in accordance with UNFPA guidelines, including a mid-term review in 1994 and a final review in 1996. The UNFPA field office would be staffed by a Country Director, a National Programme Officer, an administrative and a programme assistant as well as support staff.

Financial summary

47. As indicated in paragraph 1, UNFPA would provide assistance in the amount of $10.7 million, of which $6.5 million would be committed from UNFPA regular resources. If UNFPA's funding situation permits, the balance of up to $4.2 million may be provided by UNFPA. If and to the extent this is not possible, UNFPA would seek to cover the shortfall from other sources, including multi-bilateral sources. The table below shows how the programme would accommodate the two levels of funding:

	UNFPA regular resources $	Other resources $	Total $
Maternal and child health and family planning	2,500,000	1,700,000	4,200,000
Information, education and communication	1,700,000	1,400,000	3,100,000
Data collection and analysis	700,000	200,000	900,000
Population policy formulation	800,000	500,000	1,300,000
Women, population and development	200,000	400,000	600,000
Special programmes	200,000	--	200,000
Programme reserve	400,000	--	400,000
TOTAL	6,500,000	4,200,000	10,700,000

V. RECOMMENDATION

48. The Executive Director recommends that the Governing Council:

(a) Approve the programme for Niger in the amount of $10.7 million for five years;

(b) Authorize the Executive Director to commit an amount of $6.5 million from UNFPA's regular resources;

(c) Further authorize the Executive Director to provide the balance of up to $4.2 million from UNFPA's regular resources, if such resources are available. If and to the extent they are not, further authorize the Executive Director to seek to cover the shortfall from other resources, including multi-bilateral sources;

(d) Authorize the Executive Director to allocate the funds and make appropriate arrangements with the Government of Niger and with the executing agencies.